

# ***Indiana Health Informatics Corporation (IHIC)***

*July 9, 2009*

## *Meeting Minutes*

The following Board Members were present:

- Kent Barth
- Chuck Christian
- Stan Crosley
- Linda Chezem
- Brian Bauer
- Randy Howard, MD
- Jim Edlund, MD

Also in attendance were David Johnson (BioCrossroads), John Kansky (IHIE/IHIC staff), Chris Mickens (ISDH), Randy Miller (ISDH), Tom Penno (IHIE), Joe Fox, MD (Anthem), Ryan McCartney (ISDH), Kim Metzger (Ice-Miller), Dave Kelleher (Employer's Forum of Indiana), Lori Leroy (BioCrossroads), and Jason Vore (IHIC staff/consultant).

### Welcome and Introductions

Kent Barth called the meeting to order at 9:00am, and attendees introduced themselves.

### ARRA Extension Center Update

Mr. Barth discussed that the IHIC Board needs to be plugged into the ARRA Extension Center development/grant process, and briefly described the connection with Purdue University and BioCrossroads for that opportunity. The process is still unclear as to how the Federal Government will allocate ARRA funds, but we need to be ready to move. Rand Miller discussed that Indiana will most likely need to have a State Designated Agency as the "vehicle" through which applications and funds will flow, and is talking with the Lt. Governor's office to determine how to make IHIC such an Agency. Randy will also be providing the Indiana State Privacy Policy to see if it can apply to IHIC. Mr. Barth also mentioned that David Johnson from BioCrossroads would attend the meeting to provide additional insight as to the Extension Center and overall ARRA situation.

### State of Indiana Health Information Exchange Collaboration Update

John Kansky provided a high-level overview of the activities to-date of the 5 HIEs that have met in recent months to explore common objectives and consider potential collaboration. Per Mr. Kansky, the dialogue has been very helpful in building relationships and sharing ideas and common challenges.

### Meaningful Use (MU) Definition Update

John Kansky reviewed the activities related to MU definition to date:

- June 16<sup>th</sup> – initial MU definitions released by ONC.
- June 17<sup>th</sup> – IHIC Board Members solicited for comments on initial MU draft.
- June 26<sup>th</sup> – official Comments letter sent by Mr. Barth on behalf of IHIC
- July 16<sup>th</sup> – target re-release of draft MU definitions by ONC

Mr. Kansky discussed that there was a lot of pushback on the initial MU definitions from pretty much anyone who reviewed them, and that was why the ONC was motivated to ask for a re-draft of the definitions. Both Chuck Christian and Stan Crosley discussed the challenge of timing between the release of MU definitions and the release of consequences that will occur if MU definitions are not met in the future. Mr. Kansky alerted the Board that upon re-release of the definitions that the Board would be contacted.

### IHIC Workgroup Update (Medication List Availability)

Mr. Barth reviewed that the three IHIC Workgroups would be providing updates as to their activities and preliminary recommendations during the Board meeting.

Dr. Joe Fox (MLA Workgroup leader, from Anthem) reviewed a document that listed the background on the MLA Workgroup's assumptions and activities, as well as initial recommendations (please see the MLA Workgroup document listed on the IHIC website under the Previous Board Meeting section – the web address is:

<https://myshare.in.gov/FSSA/ihic/default.aspx>).

Dr. Fox then asked if there were any questions or comments from the Board on the MLA Workgroup progress. Chuck Christian and Dr. Edlund both made comments about the MLA “process and application” must be both efficient and effective regarding what types of challenges this Workgroup is aiming to solve. Multiple people made comments related to the need to track patient compliance with medication administration and consumption.

Dr. Fox asked what the Board's direction to the MLA Workgroup was in terms of next steps. Mr. Barth mentioned that this Board meeting was a checkpoint for the MLA Workgroup (and the other two Workgroups as well), and that the Board needed to evaluate each Workgroup's progress and recommendations before determining how to proceed.

### IHIC Workgroup Update (Value Based Reimbursement)

Dave Kelleher (VBR Workgroup leader, from the Employer's Forum of Indiana) reviewed a presentation that provided an update on the VBR Workgroup's activities to date, as well as some initial needs and recommendations (please see the VBR Workgroup document listed on the IHIC website under the Previous Board Meeting section – the web address is:

<https://myshare.in.gov/FSSA/ihic/default.aspx>).

Mr. Kelleher then led discussion related to the overall notion that involving Medicaid/OMPP with the workgroup has been challenging because of Medicaid's perceptions of Quality Health First (QHF) and goal to be independent as to what quality measurement tool(s) are utilized. The question arose as to how QHF was named in the VBR Workgroup's goals and objective, and the group agreed that it was named by the IHIC Board when originally developing the vision that drives all of the Workgroups.

Randy Miller discussed that Medicaid/OMPP would like to foster competition, and that they would be comfortable having 3 or 4 solutions they could look to for defining and monitoring quality. Chuck Christian then asked wouldn't there be better economies if there were only one vehicle? The group then discussed (and agreed) that Medicaid/OMPP and QHF/IHIE need to get together and move toward some resolution as to how they might be able to work together.

Mr. Christian then discussed that, relative to the VBR presentation, the Board needs recommendations to react to in order to drive direction.

#### IHIC Workgroup Update (Community Health Record/Care Coordination)

Stan Crosley (CHRI/CISCC Workgroup leader, from Eli Lilly) reviewed the charge for the Community Health Record in Indiana/Clinical Information Supporting Coordination of Care (CHRI/CISCC) Workgroup. Mr. Crosley discussed the activities and a brief overview of the discussion that occurred during the first CHRI/CISCC Workgroup meeting in early June. Specifically, the group discussed the definitions and terms associated with the vision, discussed the need for the BioCrossroads HIE comparison documentation (once it was out), and what the group's focus would be on next.

The group agreed that "Community Health Record" would (at minimum) include day-to-day critical information (i.e. laboratory information, radiology information, and transcribed reports), and have some percent of availability to a broader audience (i.e. not just available to a physician EMR). The group also agreed that "Coordination of Care" would need to be broader, not just physician to physician. The group discussed that CHR will enable and support CISCC.

Next steps agreed to: send out the BioCrossroads report to the Workgroup (and the Board), send the definitions agreed-to by the Workgroup out to both the Workgroup and the Board, and then develop a "gaps" list of what is/is not covered and where in Indiana by HIEs.

#### ARRA/ Extension Center Funding Update

David Johnson (CEO, BioCrossroads) reviewed that in the short term, it seems like ARRA funds will be doled out to all states (potentially split up using some formula or calculation, potentially by "readiness" or RFP-response) – and that some states have a well-articulated plan in place to utilize those funds. Mr. Johnson suggested that Indiana needs a State Designated Body (i.e. IHIC) that will be a vehicle to pursue and receive ARRA funds.

Mr. Johnson further suggested that IHIC/State Designated Body needs a "spending plan" developed and ready to send out to the Fed – i.e. "if we had \$75 Million, how would we spend it?" All funds (HIE-specific) will be run through and to state HIE programs, and because of that, each state will be competing to bring in as much money as possible to their HIE programs or plans.

Mr. Johnson reviewed the following three "areas" of ARRA that IHIC/State Designated Body should consider pursuing:

1. Extension Center Programs/Funding
2. HIE Program Extension and Propagation
3. Potentially Low Cost Financing Support

Mr. Barth indicated that IHIC needs to support the activity that Randy Miller is currently pursuing in understanding how IHIC needs to be designated a State Body, and how/if the Lt. Governor's office will be coordinating the RFP responses that are anticipated to be in development in coming months.

Mr. Johnson also mentioned that the advice from the Federal representatives he has heard from indicates that spending plans we might develop should look a lot like implementation plans versus "planning plans" (i.e. there will be more funds distributed for implementation then for planning).

The Board agreed that IHIC/Indiana needs to move fast, and put a plan/plans together quickly. Mr. Johnson agreed, and discussed that since Indiana has well-established HIE capability, we are already past that "gate" and can move onto other implementation/spending opportunities and plans.

The Board asked for volunteers to be part of a sub-group that will work on developing these plans, the following individuals volunteered:

- Kent Barth
- Chuck Christian
- Dr. Marc Overhage/Tom Penno
- Dr. Judy Monroe/Chris Mickens
- Stan Crosley
- Randy Miller
- BioCrossroads Support (per David Johnson)

The Board agreed that this sub-group needs to mobilize quickly.

Mr. Barth adjourned the meeting.

*Next Meeting: September 10, 2009, 9:00-11:00am (Purdue Intech Park)*